



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 8235

<b>SERIAL NUMBER</b> 10/531,345	<b>FILING OR 371(c) DATE</b> 04/15/2005 <b>RULE</b>	<b>CLASS</b> 329	<b>GROUP ART UNIT</b> 1600	<b>ATTORNEY DOCKET NO.</b> OSU0010PA/41096.25	
<b>APPLICANTS</b> Cynthia Roberts, Columbus, OH; Ashraf Mahmoud, Albany, OH;					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/32616 10/15/2003					
<b>** FOREIGN APPLICATIONS *****</b> UNITED STATES OF AMERICA 60418511 10/15/2002					
** SMALL ENTITY **					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 13	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 23368					
<b>TITLE</b> Customized transition zone system and method for an ablation pattern					
<b>FILING FEE RECEIVED</b> 300	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		